



State of Rhode Island and Providence Plantations  
 Department of State - Business Services Division

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 SECRETARY OF STATE  
 CORPORATIONS DIV

2019 APR 10 AM 10:18

Annual Report for the year:

Non-Profit Corporation

2019

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number <b>001662518</b>		2. Exact name of the Corporation <b>Young Democrats of Rhode Island</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>Organizing Young Rhode Islanders to realize Democratic Change.</b>			
4. NAICS Code <b>813319</b>					
6. Principal Office Address <b>55 Cromwell St</b>		City <b>Providence</b>		State <b>RI</b>	Zip <b>02907</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Heidi Silverio</b>			Vice-President Name <b>Jason Roias</b>		
Street Address <b>17 <del>Crown</del> Crowninshield St</b>			Street Address <b>48 Malvern St <del>02904</del></b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02904</b>
Secretary Name <b>Noel A Frias Galvan</b>			Treasurer Name <b>Noel A Frias Galvan</b>		
Street Address <b>47 Alexander St</b>			Street Address <b>47 Alexander St</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Heidi Silverio</b>			Director Name <b>Jason Roias</b>		
Street Address <b>17 Crowninshield St</b>			Street Address <b>48 Malvern St</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02904</b>
Director Name <b>Noel A Frias Galvan</b>			Director Name		
Street Address <b>47 Alexander St</b>			Street Address		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02907</b>	City	State	Zip
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>Noel A Frias</b>					Date <b>4/10/19</b>
Signature of Officer/Authorized Representative <i>Noel Frias</i>					

**FILED**

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BY CU 3X907